CANNING	G vs CREIGHTO	N UNIVERS	SITY				,		•	
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	1				2					
	1	IN THE UNITED STATES DISTRICT COURT			3	<u>Page</u>				
	2	FOR THE DISTRICT OF NEBRASKA			4	DIRECT EXAMINATION BY MR. ZALEWSKI				
	MARY E. CANNING,)		_	CRC	DSS-EXAMINATION BY	MR. BUNTAIN	25	
	Plaint 4	iff,) Case No. 4:18 CV-03023		5		FVI	LLDLTC		
	vs. 5 CREIGHTON UNIVERS	Tmv)		6		EXF	<u>IIBITS</u>		
	6 Defend	,) DEPOSITION OF) TIMOTHY J. GRIFFIN, M.D.		•	No.	<u>Description</u>	<u>Page</u>		
	7)		7					
	8					1	8/31/15 Faculty Evalua		9	
	9				8	2	11/4/15 Faculty Evaluation 2/16/16 Documentation		10 11	
	10				9	3 4		Service Evaluation for	15	
			J. GRIFFIN, M.D., taken PR, CSR, and General Notary		•	•	Interns	2011100 2141144110111101		
	_		of Nebraska, beginning at		10	5	E-mail correspondenc		21	
			of December, 2018, at		44	6	12/20/16 Probation Le		21	
	15 12910 Pierce Str	eet, Suite 200,	Omaha, Nebraska, to be read		11	7	Documentation by Dr.	Cicnowski	22	
	16 in evidence on h	ehalf of the pla	aintiff, pursuant to the		12					
	17 Federal Rules of	Civil Procedure	e and the within stipulations.		13					
	18				14					
	19				15 16					
	20				17					
	21		RINGTON, RPR, CSR		18					
	22	7602 Pacific St	Reporters treet, Suite LL101		19					
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1		ΔPPF	2 EARANCES						4	
•		<u> </u>			1		(Whereupon, the part	ties have stipulated to w	vaive	
2	For the Plaintiff:		nes C. Zalewski		2		Nebraska Rule 6-3	30, Sections 8(A) and (C),	
3		Attorney at 575 Fallbro	ok Boulevard		3		and the following pro	ceedings were had, to	wit:)	
		Suite 100			4		TIMOTHY	J. GRIFFIN, M.D.,		
4			braska 68521 ozwlaw.com		5		having beer	i first duly sworn,		
5		jzaiewskie	ozwiaw.com		6		was examined a	and testified as follows:		
•	For the Defendan				7		DIREC	T EXAMINATION		
6		Attorney at 12910 Piero			8	BY N	MR. ZALEWSKI:			
7		Suite 200			9		Would you state your na	me and address for the	record	
8			braska 68144 clinewilliams.com	01:53PM			please.	and addition for the	, , , , , , , , , , , , , , , , , , , ,	
J		abantanie	Sinte Williams.com	01.001 W	11		Timothy J. Griffin, M.D.	My home address?		
9	Also Present:		ary Canning		12		9	•	wont	
10		Mr. David M	leiergera				You can give home or b			
					13		11805 Oakair Plaza, Or			
11					14		My name is Jim Zalewsk		-	
12				01:53PM	15		Mary Beth Canning in a	-		
					16		Creighton, and I'm going	j to ask you some ques	tions	
13 14					17		today about your knowle	dge of certain aspects	of that	
15					18		case.			
16					19		Have you ever beer	n deposed before?		
17 18				01:54PM	20	A.	Yes.			
19					21		So you kind of know how	v it works, where we ha	ve to giv	
20					22		audible answers, so we			
21 22					23		try to keep the record st		,	
23					24		Yes.	g,g.it.		
24								A nod of the head as	chrug	
25				01:54PM	20	u .	I just want to make sure	. A nou or the neau, a s	anuy	

	<u> </u>	CREIGHTON UNIVERSITY 21			23
1	Q.	Did you see Mary Beth Canning make any significant	1		your part of it is on the bottom of the page, and
2		errors on patient discharges?	2		there's a little paragraph at the top. These are notes
3	A.	Not at the VA.	3		that were compiled by Dr. Cichowski.
4		(Exhibit No. 5 marked for identification.)	4	Α.	Okay.
2:18PM 5	Q.	(BY MR. ZALEWSKI) Dr. Griffin, the reporter has handed	02:21PM 5	Q.	And I just want you to read the Thursday, January 17
6	Œ.	you Exhibit 5, which it looks like an E-mail letter you	02.21PM 6	Q.	(sic), 2017 remarks, where it starts, Tim Griffin came
7		sent to Mary Beth Canning, and copied Dr. Joann Porter;	7		to the VA.
8		is that correct?	8	^	January 14th?
	^		9	Α.	
9	Α.	Correct.		Q.	Yes, and just read through that, and I have a question
D2:18PM 10	Q.	Did Mary Beth Canning ask you to write a letter of	02:21PM 10		to ask you.
11		support?	11	A.	(Witness reviewing Exhibit 7.)
12	A.	Yes, she did.	12		I agree with this, except for one sentence.
13	Q.	And is this the letter that you wrote, then, to give to	13	Q.	What sentence do you disagree with?
14		the committee?	14	A.	He concluded the meeting by indicating he wanted me to
D2:18PM 15	A.	Yes.	02:23PM 15		know that he supported the program's decision to
16	Q.	Does this accurately assess what your observations were	16		terminate, based on a long history of deficiency,
17		about the work she performed at that time?	17		without significant enough improvement with program
18	A.	Yes.	18		support. I do not remember saying that.
19	Q.	Okay.	19	Q.	All right. And I notice, on the first page of the
02:19PM 20		(Exhibit No. 6 marked for identification.)	02:23PM 20		exhibit, there's a sentence that says, all of us make
21	Q.	(BY MR. ZALEWSKI) Dr. Griffin, the reporter has handed	21		mistakes, and this is talking about forgetting to
22		you Exhibit 6, which is the probation letter Mary Beth	22		put the discharge of a patient on anticoagulants. You
23		Canning received. Have you seen that document before?	23		said, he fears all of us make mistakes?
24	A.	No.	24	A.	Doctors make mistakes, yes.
02:19PM 25	Q.	The reason I ask is it seems that Exhibit 5, your	02:23PM 25	Q.	After that point in time, when you went and talked to
		22			24
1		letter, seems to track some of the allegations made in	1		Dr. Cichowski, did you have any other involvement with
2		Exhibit 6; that you kind of, like, responded to those	2		any decisions with respect to Mary Beth Canning being
3		items, in a sense. Does that refresh your recollection	3		terminated from the program?
4		any if you've ever seen this?	4	A.	No.
D2:20PM 5	A.	I do not recall seeing this letter.	02:24PM 5	Q.	And did the appeals committee talk to you at all after
6	Q.	Did Mary Beth Canning ever meet with you and show it to	6		she filed that appeal?
7		you?	7	A.	No.
8	A.	I don't recall.	8	Q.	Is Mary Beth Canning the oldest resident you've
9	Q.	If you don't I mean, you can't I just want to	9		supervised?
02:20PM 10		know if you recall or not. Mary possibly E-mailed it	02:24PM 10	Α.	I don't know how old she is, but I think so.
11		to you?	11	Q.	In the scheme of well, what's the average age of a
12	Α.	Possibly. It does look like I must have seen this.	12	<u> </u>	resident, if you can recall, if you can give me a
13	Q.	-	13		ballpark figure?
14	u.	•	14		25 to 30's.
		position and response between your letter of Exhibit 5		Α.	
D2:20PM 15		and this document, Exhibit 6; is that possible?	02:24PM 15	Q.	All right. And is that usually what it is every year
16	Α.	It's possible.	16		when you teach the residents?
17	Q.	Okay. Did you get any response back from Dr. Cichowski	17	Α.	Yes.
18		after you sent that	18	Q.	Did you ever think she had a learning disability or
19	A.	No.	19		dementia?
D2:21PM 20	Q.	or Dr. Porter, I'm sorry?	02:24PM 20	A.	No.
21	A.	No.	21		MR. ZALEWSKI: Just a minute. I might
21	_	Okov	22		be done. Let me talk to them.
22	Q.	Okay.			
	Q.	(Exhibit No. 7 marked for identification.)	23		(A break was taken.)
22	Q.				

CANNING vs CREIGHTON UNIVERSITY **CERTIFICATE** 2 STATE OF NEBRASKA) ss. COUNTY OF DOUGLAS 3 I, TAMMY J. HETHERINGTON, RPR, CSR, and General Notary Public in and for the State of Nebraska, do hereby certify that TIMOTHY J. GRIFFIN, M.D., was by me duly sworn to testify to the truth, the whole truth, and nothing but the 8 truth; and that the deposition as above set forth was reduced 9 to writing by me and is a true and accurate transcription of 10 the testimony given by said witness; 11 That the within and foregoing deposition was reported by 12 me at the time and place herein specified and in accordance 13 with the within stipulations, the reading and signing of the 14 witness to the deposition having been expressly waived; 15 That I am not counsel, attorney or relative of any of 16 the parties or otherwise interested in the event of this 17 18 IN TESTIMONY WHEREOF, I have placed my hand and Notarial 19 Seal this 26th day of December, 2018. 20 21 General Notary Public 22 23 24 25 30 1 IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF NEBRASKA 2 MARY E. CANNING. 3 Case No. 4:18 CV-03023 Plaintiff. CREIGHTON UNIVERSITY, 6 COST CERTIFICATE Defendant. 7 8 9 CERTIFICATE OF DEPOSITION OF TIMOTHY J. GRIFFIN, M.D. 10 Taken in behalf of 11 the plaintiff. 12 The Original Deposition is in the possession of: 13 Mr. James C. Zalewski 14 Attorney at Law 575 Fallbrook Boulevard 15 Suite 100 Lincoln, Nebraska 68521 16 17 Costs: 18 Tammy J. Hetherington 19 Notary Public 20 21 Date: 12/26/18 22 23 24 25

then should could potentially complete that year but if any patient safety issues occurred that termination would be our only ethical option. I admostledged that perhaps she feels this is unjust but from the CCC perspective, what would be more unjust is if we allow her to practice unsafely and she harms someone and she would never forgive herself because she has such a compassionate heart.

She asked Dr. Hurley if agrees with this. He indicated that he's a CCC member, has been involved with all the discussion and decision making and again reviewed the documentation and agrees with this course of action because it's clear that she is unable to progress adequately to be able to treat patients safely.

EXHIBIT

She gave us her pager and the meeting ended.

Saturday Jan 7, 2017 VA Slue room

Joleen Fixley asked to speak with me. She updated me that IARC contacted her and Tim Griffin to seek a supportive letter from each of them. Jolean said MBC shared honestly, all the struggles size's been having since rounding with them earlier this academic year. Jobsen reviewed much of what was outlined in MillO's Under Review and Probation letters, as well as the event that lead to MBC's termination. Jolean wanted me to know that the low patient volumes, much slower pace on VA HMS did allow her and the supervisor to safety provide direct supervision. Joken feels MBC's kind, compassionate heart is her strength. She admitted that MCS spent a lot of time connecting emotionally with patients and families but this often seemed to distract her from the medical tasks at hand. Joleen felt MIDC had improved this year as compared to har performance on VA HWS last academic year. An example she used was that MBC was able to call her when she recognized a deteriorating patient but was unable to develop a plan of care for that patient. While this was an improvement in MBC's performance, we both agreed that this action was at the level we expect from medical students, rather than interns. Joleen also admitted that after walking MBC through the assessment and development of a plan of care for that deteriorating patient, MBC was unable to document in the medical record without significant hale. Jolean explained that she hoped MBC could remain in some sort of healthcare service career as she's passionate about helping people. She mentioned Family Medicine but upon further discussion, we both agreed that MBC does NOT have the knowledge and skills to be successful in the ICU rotations necessary to graduate from a Family Medicine program. Joleen clarified for me that she wants to support MBC but does NOT feel that MBC should be reinstated our program. She wants to support her in seeking alternative career options. She also is curious why MBC is appealing her termination because MBC shared with her that she no longer wants to continue on with Internal Medicine training and admitted she doesn't have the skill set for success in Internal Medicine. I clarified for Jolean that GME had offered MBC counsel that withdrawing from the program would keep the termination off her record, perhaps helping her be successful in seeking other career options. But if MBC elects to appeal her termination, then the option of withdrawing is no longer available to her. Joleen said she does not think MBC understands this and could be hurting her future options. I shared with Jolean that Dr. Porter let me know face to face that MBC was counseled on her time sensitive option to withdraw. Upon conclusion of this conversation with Jolean, I updated Dr. Porter on the potential confusion on MBC's part.

Thursday Jan 14, 2017

Tim Griffin came to VA Red Clinic to request to speak with me in private. He shared with me that M8C had contacted him for a letter of support. He wanted me to know that he felt obligated to provide her a letter of support because she's such a nice person. He also felt obligated to document that because of the VA HMS' low patient volume and slower pace, he did not experience an inability to provide safe patient care while providing her ongoing direct supervision. He did indicate that he felt the program had provided her plenty of support and apportunity to improve. He also admitted that his previous inpatient work at CUMC allows him to see that perhaps the fast pace and high patient volumes at that site could prove challenging with MBC and her limited skill set. In regards to her termination after forgetting to discharge a patient on anticoagulants, he fears that all of us make mistakes that could put patients in danger. I agreed but shared with him that an error of omission of a discharge medication should be caught with appropriate system support (and was caught in this case), but when a medical provider defends the error by admitting he/she had little

4:18-cv-03023-JMG-CRZ, Doc # 55-2 Filed: 01/18/19 Page 5 of 5 - Page ID # 715

understanding of the clinical reason during the hospitalization, the core competency deficiencies are highlighted as the case of the error. He agreed. He concluded the meeting by indicating he wanted me to know that he is supportive of the program's decision to terminate based on a long history of deficiency without significant enough improvement with program support. I thanked him for his communication.

Email received 1/12/17 from an R3 Chief Resident:

To whom it may concern:

I had the opportunity to work with Mary Beth Canning in a hospital wards setting. I interacted with her and observed her performance over the rotation. She required continuous direct supervision in all aspects of her position as an internal medicine resident. I do not feel that she is able to successfully manage patients without constant direct supervision. In the name of patient safety and patient care I would not feel comfortable or safe with Mary Beth Canning training under my medical license.

Regards,			
	er o representat de milita de selado algun per en	 \$\psi\cdot\cdot\cdot\cdot\cdot\cdot\cdot\cdot	Circle in any second distribution of the second control of the sec

Documentation received by email on 1/15/17 by an R3 Chief Resident:

"Re: Dr. Mary Beth Canning

A resident must be both proficient in medical knowledge as well as efficient with the usage of their time. A deficiency in either makes the path toward success much more difficult. A deficiency in both of these areas is the most concerning as it can lead to lapses in patient care. I have worked both as a team member with Dr. Canning as well as observed her interacting with colleagues and other members of the health care team. It is my opinion that she has severe deficiencies in both of the above mentioned areas. I believe this puts a large strain on the medical team as a whole as well as the taff physicians in charge of overseeing her work. If I were a staff physician, I would not feel comfortable having her as a resident on the team. "

Email received 1/15/17

Erica and everyone.

I have documented my concerns about Marybeth Canning in my evaluation. However, I continue to have concerns about her ability to function as a physician leader despite our program's efforts to give her more time to adequately acclimate and work to meet our minimum standards.

Physicians need to be able to have the ability to function as high level managers, managing patient care and the care team to achieve the best outcomes. With regard to Marybeth, I have significant concerns about her ability to manage small and basic tasks. Essentially, I do not believe that Marybeth has the needed skill level that is required by our profession. I do not believe she has the depth of inquiry, knowledge, or insight that one expects at this level. At this time, I believe we would be doing a disservice to our profession and program if we were to graduate someone that has continuously shown that she is not able to meet the basic demands and standards of our profession.

I would be happy to answer any questions or concerns with regard to this letter, please call, anytime.

Sincerely,